



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Ellis Reinherz and Linda Clayton

Application No.: 08/948,124

Group: 1642

Filed: October 9, 1997

Examiner: Yaen, Christopher H.

Confirmation No.: 6658

For: METHODS OF IDENTIFYING AGENTS WHICH ENHANCE CASPASE  
ACTIVITY (As Amended)

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, P.O. Box 2327, Arlington, VA 22202	
on <u>1/2/03</u>	<u>L. Dawn Myers</u>
Date	Signature
<u>DAWN MYERS</u>	
Typed or printed name of person signing certificate	

RECEIVED  
JAN 09 2003  
TECH CENTER 1600/2900

Assistant Commissioner for Patents  
P.O. Box 2327  
Arlington, VA 22202

Sir:

Transmitted herewith is Amendment E for filing in the above-identified application.

☒ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

☐ A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

	(COL. 1)		(COL. 2)	(COL. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	9	MINUS	* 52	0
INDEP	3	MINUS	** 4	0
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

\* not fewer than 20  
\*\* not fewer than 3

SMALL ENTITY	
RATE	ADDIT. FEE
X \$ 9	\$
X \$42	\$
+ \$140	\$

TOTAL = \$ 0

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$
X \$84	\$
+ \$280	\$

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for three month Extension of Time	\$	<u>465</u>
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>465</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By

  
Linda M. Chinn

Registration No.: 31,240

Telephone (978) 341-0036

Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated:

*January 2, 2003*